

# Morbidity and Mortality



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REPORT

For  
Week Ending  
January 13, 1973

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / PUBLIC HEALTH SERVICE HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

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## CURRENT TRENDS

### INFLUENZA - Worldwide, United States

#### WORLDWIDE

**USSR:** Widespread influenza-like illness has reached epidemic proportions in Moscow and Leningrad, and these cities are reporting 70,000 and 30,000 new cases of influenza daily. The virus responsible for the illness appears to be similar to A/England/42/72.

**United Kingdom:** Reports to public health officials note a decline in disease in southern England, but influenza continues to increase in northern England, particularly in the Midlands and East Anglia. A/England/42/72 virus has been isolated in large numbers from ill patients.

**France:** The Paris area is experiencing widespread influenza. Eight isolates of a virus similar to A/England/42/72 were obtained in December 1972.

(Reported by the World Health Organization: Weekly Epidemiological Record, Vol. 48, No. 2, Jan. 12, 1973.)

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### UNITED STATES

**Georgia:** Isolated outbreaks of acute respiratory disease have been reported in Georgia, and 1 college of 1,400 students in northern Georgia has been closed because of respiratory illness in approximately 25% of the student body. Eight iso-

TABLE I. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

(Cumulative totals include revised and delayed reports through previous weeks)

DISEASE	2nd WEEK ENDING		MEDIAN 1968-1972	CUMULATIVE, FIRST 2 WEEKS		
	January 13, 1973	January 15, 1972		1973	1972	MEDIAN 1968-1972
Aseptic meningitis	49	40	29	72	84	65
Brucellosis	—	4	1	1	4	2
Chickenpox	4,079	3,329	—	6,809	5,250	—
Diphtheria	—	4	4	2	4	4
Encephalitis, primary:						
Arthropod-borne and unspecified	7	20	20	18	31	35
Encephalitis, post-infectious	2	1	3	3	5	12
Hepatitis, serum (Hepatitis B)	138	164	123	240	321	250
Hepatitis, infectious (Hepatitis A)	868	1,102	1,057	1,576	2,027	2,003
Malaria	3	104	50	6	141	90
Measles (rubeola)	631	650	650	1,000	1,199	1,199
Meningococcal infections, total	27	27	67	50	66	115
Civilian	23	26	64	45	63	108
Military	4	1	3	5	3	3
Mumps	1,334	2,303	2,466	2,441	3,927	4,236
Rubella (German measles)	336	377	449	470	621	753
Tetanus	—	—	—	—	—	—
Tuberculosis, new active	447	459	—	809	833	—
Tularemia	1	2	2	4	4	4
Typhoid fever	1	6	6	6	8	10
Typhus, tick-borne (Rky. Mt. spotted fever)	1	2	—	1	4	1
Veneral Diseases:						
Gonorrhea	14,374	13,365	—	25,181	24,862	—
Syphilis, primary and secondary	571	445	—	940	758	—
Rabies in animals	49	57	57	79	121	121

TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Anthrax:	—	Poliomyelitis, total:	—
Botulism:	—	Paralytic:	—
Congenital rubella syndrome: Calif. - 1	1	Psittacosis:	—
Leprosy: N.J. - 1	1	Rabies in man:	—
Leptospirosis: Hawaii - 1	2	Trichinosis: N.J. - 4	4
Plague:	—	Typhus, murine:	—

**INFLUENZA – Continued**

lates of A/England/42/72 have been obtained in Atlanta; however, emergency room visits and industrial absenteeism are normal for this time of year.

(Reported by William Marine, M.D., Professor, Department of Preventive Medicine and Community Health, Emory University School of Medicine; Maurice Miot, Virology Laboratory, and John E. McCroan, Ph.D., Chief, Epidemiology Unit, Division of Physical Health, Georgia State Department of Human Resources.)

**Louisiana:** An increase in respiratory illness has been reported in New Orleans, and 1 influenza A virus has been isolated. However, school and industrial absenteeism have not apparently increased.

(Reported by Charles T. Caraway, D.V.M., State Epidemiologist, Louisiana State Department of Health.)

**Virginia:** The State Department of Health notes increased incidence of respiratory illness with some school and industrial absenteeism in Richmond, Norfolk, and Portsmouth, but influenza appears to be confined to isolated outbreaks scattered throughout the state, and clinically, the disease appears to be relatively mild. An outbreak was reported in a veterans' hospital, with no recorded deaths.

(Reported by Karl A. Western, M.D., State Epidemiologist, Virginia State Department of Health.)

**Washington:** Isolated outbreaks of acute respiratory disease have been reported throughout the state, and some schools have been closed. Increased industrial absenteeism has not yet been reported, however. Clinically, the disease appears to be fairly severe, with many patients reporting persistence of symptoms for 1 week. The disease appears to have spread fairly rapidly in the last 7 to 10 days.

(Reported by John A. Beare, M.D., Acting State Epidemiologist, Washington Department of Social and Health Services, Health Services Division.)

**Editorial Note**

CDC has received reports of confirmed influenza type A or influenza-like disease in 24 states, representing each major geographic area of the country. These states are Arizona, California, Colorado, Connecticut, Georgia, Hawaii, Illinois, Iowa, Kansas, Louisiana, Maryland, Massachusetts, Michigan, Nevada, New Jersey, New Mexico, New York, North Carolina, Pennsylvania, Tennessee, Texas, Utah, Virginia, and Washington. Although major outbreaks are continuing in the metropolitan areas of Boston, Chicago, New York, Pittsburgh, San Francisco, and Washington, D.C., the remainder of the outbreaks reported by the states appear to be localized (Figure 1). Widespread outbreaks involving more than one-half of a state's population have not yet appeared. The etiologic agent in all states reporting virus isolations appears to be A/England/42/72.

Figures 2 and 3 show mortality data from 122 reporting cities. National pneumonia and influenza mortality has been above the epidemic threshold for 2 weeks and is, therefore, significant. The number of pneumonia and influenza deaths is below last year's level. The Mid-Atlantic and Pacific regions have had significantly increased mortality for 2 consecutive weeks.

CDC has received only a few reports of school closings and of marked industrial absenteeism, but many states report an increase in visits to physicians' offices, visits to hospital emergency rooms, and hospital admissions. Reports of clinical severity vary.

Figure 1  
INFLUENZA SURVEILLANCE – UNITED STATES, JAN. 13, 1973

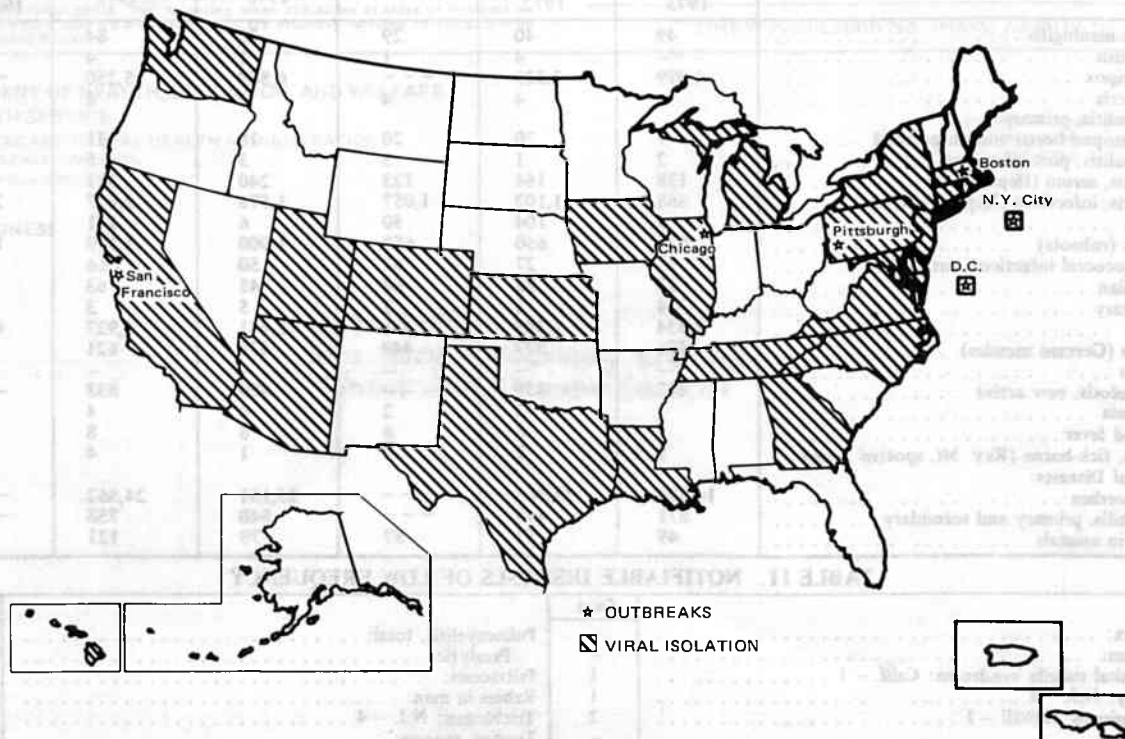
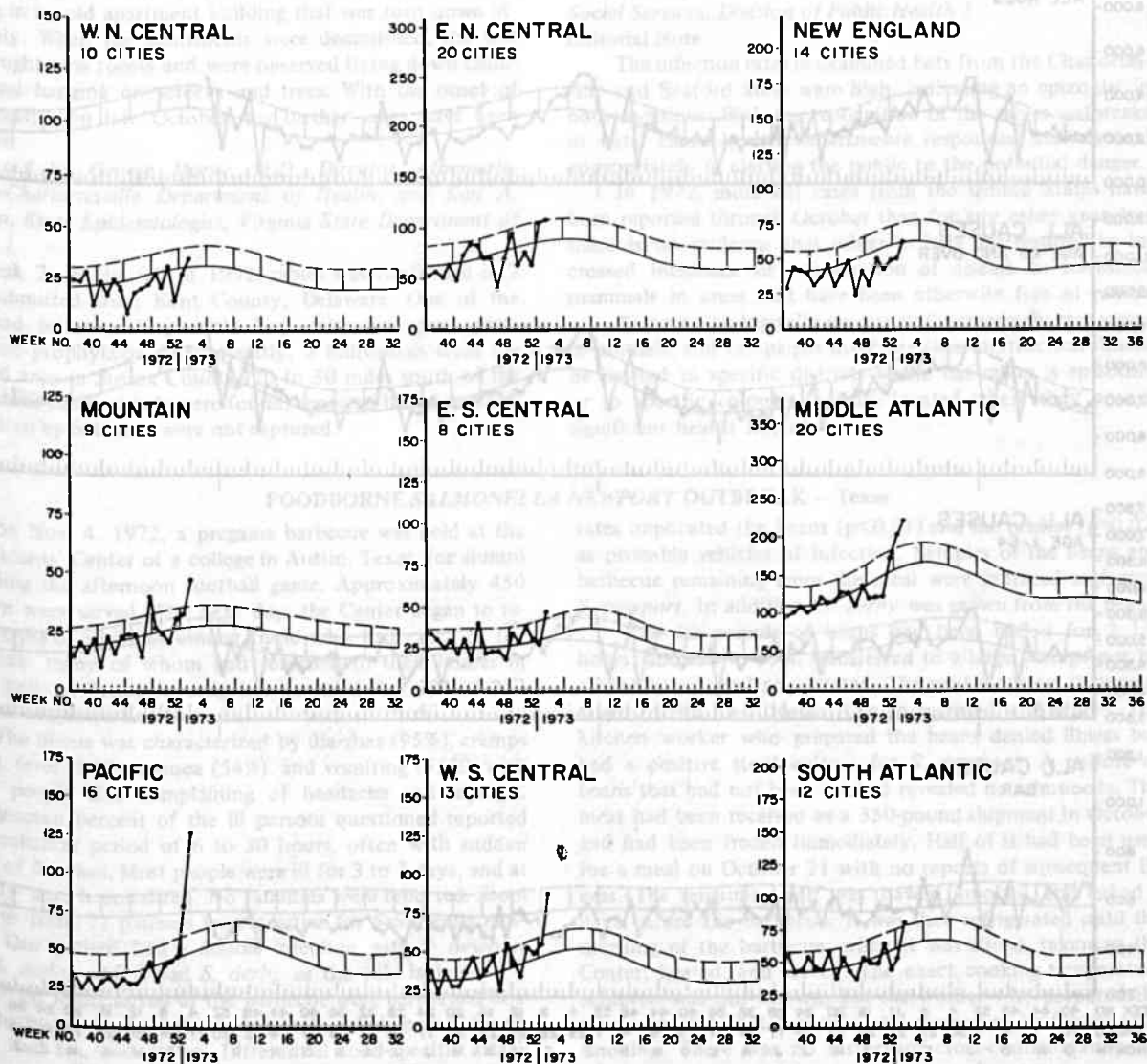
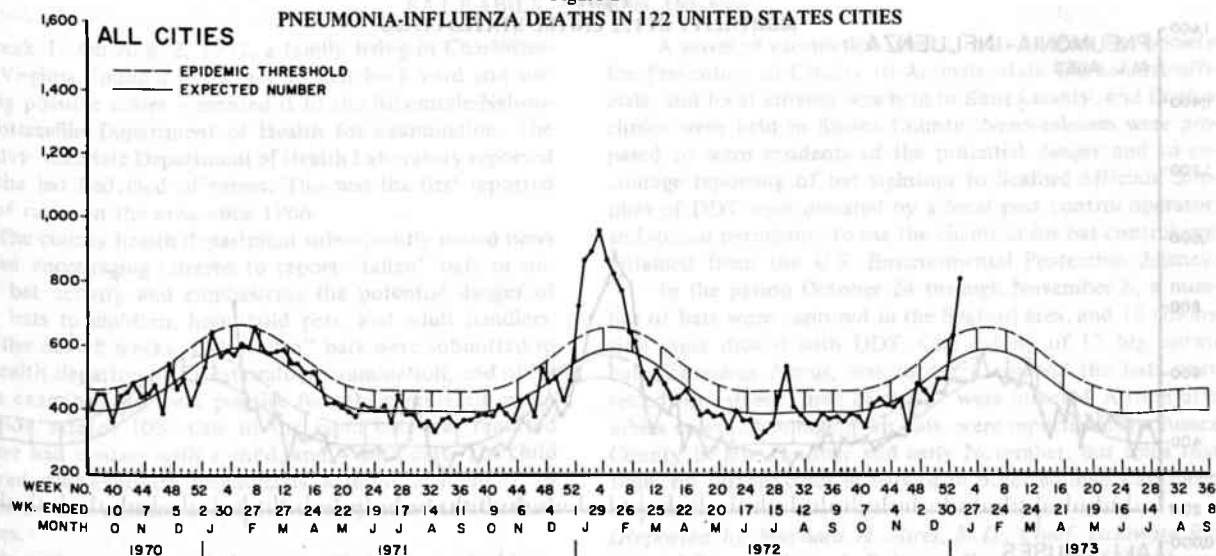
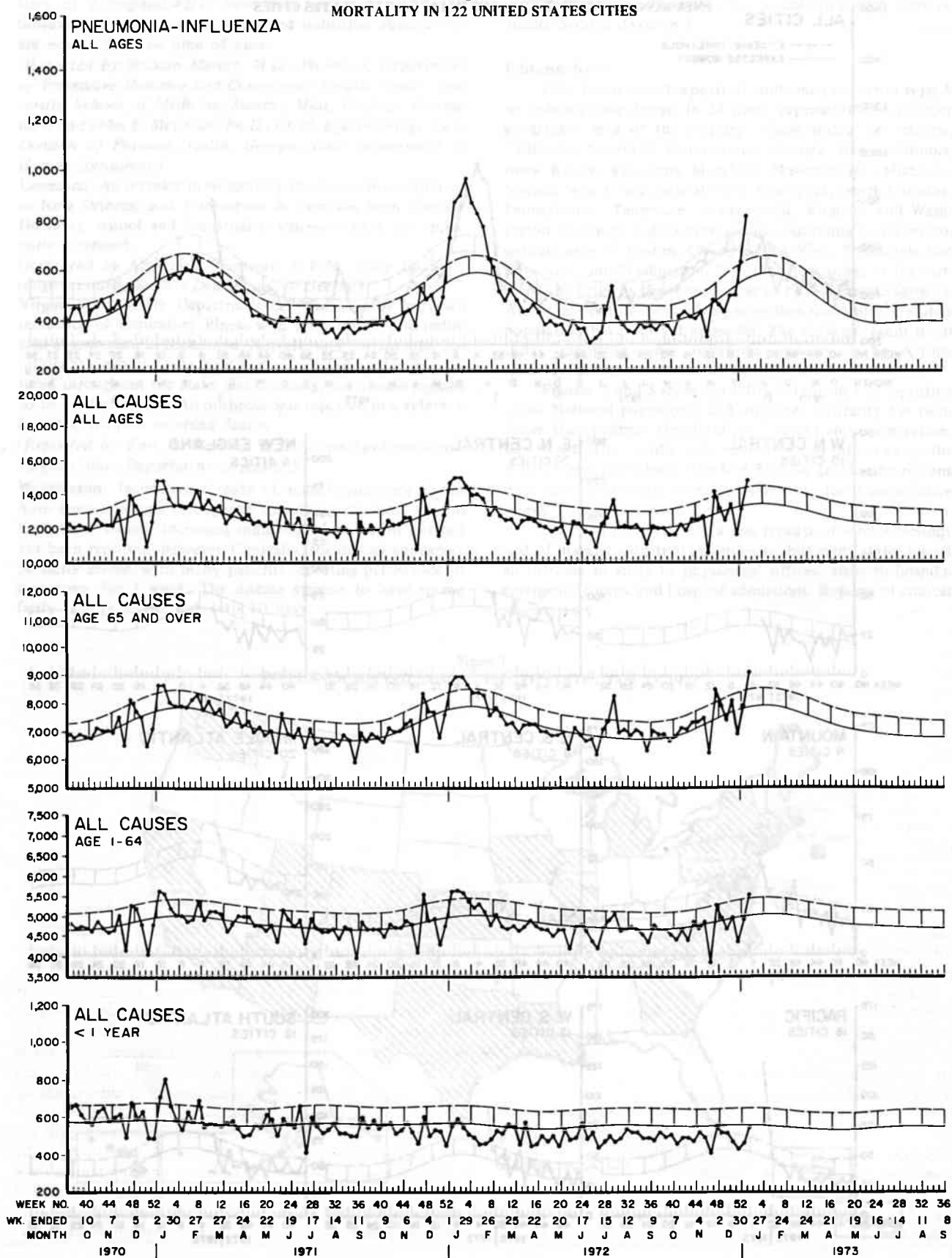


Figure 2

## PNEUMONIA-INFLUENZA DEATHS IN 122 UNITED STATES CITIES



**Figure 3**  
**MORTALITY IN 122 UNITED STATES CITIES**





## EPIDEMIOLOGIC NOTES AND REPORTS

## BAT RABIES — Virginia, Delaware

**Outbreak 1:** On Aug. 2, 1972, a family living in Charlottesville, Virginia, found a dying bat in their back yard and suspecting possible rabies presented it to the Albemarle-Nelson-Charlottesville Department of Health for examination. The next day, the State Department of Health Laboratory reported that the bat had died of rabies. This was the first reported case of rabies in the area since 1966.

The county health department subsequently issued news releases encouraging citizens to report "fallen" bats or unusual bat activity and emphasizing the potential danger of these bats to children, household pets, and adult handlers. Over the next 8 weeks, 114 "fallen" bats were submitted to the health department for laboratory examination, and of 99 brains examined, 10 were positive for rabies, representing an infection rate of 10%. One of the rabid bats was reported to have had contact with a child, and 4 with cats. The child received post-exposure prophylaxis without incident, 2 of the cats were euthanized, and 2 were quarantined by their owners.

Investigation revealed that several bat colonies had been nesting in an old apartment building that was torn down in late July. When the apartments were demolished, the lost bats sought new roosts and were observed flying down chimneys and hanging on screens and trees. With the onset of cold weather in late October, no further cases have been reported.

(Reported by George Moore, M.D., Director, Albemarle-Nelson-Charlottesville Department of Health; and Karl A. Western, State Epidemiologist, Virginia State Department of Health.)

**Outbreak 2:** In the fall of 1972, rabies was confirmed in 2 bats submitted from Kent County, Delaware. One of the bats had bitten a 12-year-old boy, who was given post-exposure prophylaxis. Subsequently, 3 individuals from the Seaford area in Sussex County, 20 to 30 miles south of the area where the first bats were found, reported being attacked and bitten by bats that were not captured.

A series of vaccination clinics, conducted by the Society for Prevention of Cruelty to Animals, state and federal officials, and local citizens was held in Kent County, and further clinics were held in Sussex County. News releases were prepared to warn residents of the potential danger and to encourage reporting of bat sightings to Seaford officials. Supplies of DDT were donated by a local pest control operator, and special permission to use the chemical for bat control was obtained from the U.S. Environmental Protection Agency.

In the period October 24 through November 6, a number of bats were captured in the Seaford area, and 12 colony sites were dusted with DDT. One colony of 17 big brown bats, *Eptesicus fuscus*, was captured, and all the bats were tested for rabies. Three of the 17 were infected. A total of 6 rabies cases, all in big brown bats, were reported from Sussex County in late October and early November, but since that time, no further cases in bats or in other animals have been recorded.

(Reported by Maynard H. Mires, M.D., Chief, Delaware Bureau of Disease Control, Delaware Department of Health and Social Services, Division of Public Health.)

## Editorial Note

The infection rates in examined bats from the Charlottesville and Seaford areas were high, indicating an epizootic in both locations. With the recognition of the rabies outbreaks in bats, these health departments responded actively and appropriately in alerting the public to the potential danger.

In 1972, more bat cases from the United States have been reported through October than for any other year, but there is no evidence that rabies in bats has resulted in increased incidence or introduction of disease to terrestrial mammals in areas that have been otherwise free of rabies.

Bats are a biologically unique and increasingly rare group of animals, and campaigns involving their destruction should be limited to specific districts where bat rabies is epizootic or to specific colonies that are located where they pose a significant health hazard.

## FOODBORNE SALMONELLA NEWPORT OUTBREAK — Texas

On Nov. 4, 1972, a pregame barbecue was held at the Ex-Students' Center of a college in Austin, Texas, for alumni attending the afternoon football game. Approximately 450 persons were served. The next day, the Center began to receive reports of illness among those who had eaten at the barbecue, many of whom had returned to their homes in other parts of Texas. Investigation revealed that 191 of 237 persons contacted had been ill.

The illness was characterized by diarrhea (95%), cramps (82%), fever (83%), nausea (54%), and vomiting (55%), with many people also complaining of headache and myalgia. Ninety-seven percent of the ill persons questioned reported an incubation period of 6 to 30 hours, often with sudden onset of diarrhea. Most people were ill for 3 to 7 days, and at least 14 were hospitalized. No fatalities were reported. Stool cultures from 72 patients were positive for *Salmonella newport*. One patient had a double infection with *S. newport* and *S. derby*, and 2 had *S. derby* as the sole isolate.

Food items served at the barbecue were barbecued brisket, barbecue sauce, cole slaw, potato salad, beans, bread, cake, iced tea, and coffee. Differential food-specific attack

rates implicated the beans ( $p < 0.01$ ) and the brisket ( $p = 0.02$ ) as probable vehicles of infection. Samples of the beans and barbecue remaining from the meal were cultured and grew *S. newport*. In addition, *S. derby* was grown from the beans.

The 50 pounds of beans had been boiled for 2 1/2 hours, allowed to cool, transferred to a large storage pot by a hand scoop, and refrigerated. The next morning, they were taken to the Ex-Students' Center, warmed, and served. The kitchen worker who prepared the beans denied illness but had a positive stool culture for *S. newport*. A culture of beans that had not been cooked revealed no salmonella. The meat had been received as a 350-pound shipment in October and had been frozen immediately. Half of it had been used for a meal on October 21 with no reports of subsequent illness. The remaining half was thawed, smoked, and baked 2 days before the barbecue. It was then refrigerated until the morning of the barbecue, when it was sliced, taken to the Center, heated, and served. The exact cooking temperature achieved was not known, but the worker who prepared the meat reported that a portion still seemed to be frozen after smoking. There was no history of cross-contamination be-

**SALMONELLA NEWPORT – Continued**

tween the beans and the meat during preparation, handling, or serving.

(Reported by John B. Sessums, Jr., M.D., Director, Austin-Travis County Health Department; Kay Bateman, R.N., and E. Lowell Berry, M.D., Director, Dallas Health Department, Alton Rogers, Sanitarian, and Albert G. Randall, M.D., Director, Houston Health Department; Val Viers, R.N., and M. S. Dickerson, M.D., State Epidemiologist, Texas State Department of Health; and two EIS Officers.)

**Editorial Note**

The method of contamination of the beans and brisket

is not clear. The possibility that the food handler with the positive culture was an asymptomatic carrier who contaminated these foods appears unlikely. He had no contact with the beef, and his stool culture did not grow *S. derby*, which was present in the beans. It is possible that salmonella survived in undercooked portions of the beef and that there was subsequent cross-contamination to the beans, but attempts to document this route of spread were unsuccessful.

The apparently high attack rate (81%) must be interpreted cautiously; no list of those attending the barbecue was available, and most of the people contacted were identified because they had called in to report illness.

**POSSIBLE SCOMBROID FISH POISONING – California**

On Sept. 3, 1972, a family of 4 became ill with generalized flushing, pruritus, headache, nausea, vomiting, and diarrhea 2 hours after eating commercially smoked albacore. No other food was eaten that day. The father, who had eaten the largest portion, was hospitalized with shock. He improved rapidly with intravenous fluids and antihistamines and was discharged 2 days later with a diagnosis of "fish allergy". The other family members recovered within 3 to 5 hours.

No fish remained for chemical analysis, and due to the large number of suppliers to the fish market, it was not possible to trace the fish or determine its prior handling, except that it had been purchased fresh by the market and was frozen until it was smoked on the premises.

(Reported by Robert Murray, Epidemiologist, Ichiro Kamei, M.D., Chief, Division of Acute Communicable Diseases, and Gerald A. Heidbreder, M.D., Deputy Director, Los Angeles County Department of Health Services; James Chin, M.D., State Epidemiologist, California State Department of Public Health; and an EIS Officer.)

**Editorial Note**

Between 1968 and 1971, 7 outbreaks of scombroid fish poisoning were reported for the entire United States, and in

California, 10 episodes have been reported since 1927. Undoubtedly, many cases go both undiagnosed and unreported. "Fish allergies" may be diagnosed in some of these cases, while in many mild cases of short duration, medical consultation may not be sought.

The types of fish causing scombroid poisoning (also called scombrotoxicosis or saurine poisoning) are perciform fish of the suborder *Scombroidei* (tuna, bonito, skipjack, mackerel, and albacore). Fish become toxic when there is an overgrowth of certain bacteria under conditions of improper refrigeration. Bacteria which can be involved include *Proteus morgani*, *Salmonella*, *Shigella*, *Clostridium*, *Escherichia*, and *Vibrios*. These bacteria degrade histidine into histamine and saurine, which are believed to be etiologic agents of the syndrome. Whenever scombroid fish poisoning is suspected and the incriminated fish is available, its flesh should be analyzed for histamine and cultured for bacteria. A concentration of histamine exceeding 100 mg per 100 gm of fish muscle will usually result in clinical illness (1).

**Reference**

1. Halstead BW, Courville DA: Poisonous and Venomous Marine Animals of the World. Washington, U.S. Government Printing Office, 1967, p. 653

**POSSIBLE BACILLUS CEREUS INFECTION – Wisconsin**

On Aug. 24, 1972, a woman from Milwaukee, Wisconsin, became ill with nausea and diarrhea approximately 14 hours after eating a commercially prepared chicken pot pie and was treated at a local first aid station. Her husband also ate a pie but did not become ill.

Investigation revealed that the refrigerated pies had been purchased from the delicatessen division of a local department store. None of the suspect pie remained for examination, but tests on 1 of 3 pies purchased at the same time showed mold on the surface of the pie crust and  $2.7 \times 10^6$ /gm of *Bacillus cereus*.

(Reported by M. S. Bergdoll, Ph.D., Professor, Food Research Institute, University of Wisconsin; Paul J. Pace, Chief Bacteriologist, and E. R. Krumbiegel, M.D., Commissioner of Health, Milwaukee Health Department; H. Grant Skinner, M.D., State Epidemiologist, Wisconsin Department of Health and Social Services.)

**Editorial Note**

The reported symptoms and incubation period in this outbreak are consistent with foodborne illness caused by *B. cereus*, an aerobic spore-forming organism. Laboratory analysis revealed *B. cereus* in a concentration within the range reported in previous *B. cereus* outbreaks. Although *B. cereus* is a common cause of foodborne disease in Europe, only a few foodborne outbreaks caused by this organism have been well documented in the United States. This organism should be considered in the differential diagnosis of outbreaks associated with diarrhea and cramps, with little or no vomiting or fever. Most commonly implicated foods include meat or meat products and cream or pudding preparations. Recent studies suggest that an enterotoxin may be responsible for clinical illness (1).

**Reference**

1. Goepfert JM, Spira WM, Kim HA: *Bacillus cereus*: Food poisoning organism. A review. Journal of Milk and Food Technology 35:213-223, 1972

### SURVEILLANCE SUMMARY HUMAN PSITTACOSIS — United States, 1971

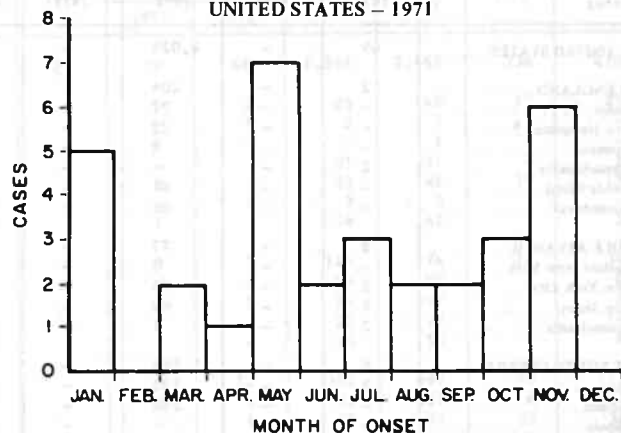
Fourteen states reported a total of 33 human cases of psittacosis with onsets in 1971. In addition, 4 human cases with onsets in 1970 were reported in 1971, increasing the 1970 case total from 36 to 40.

New York and New York City reported the largest number of cases (7) in 1971, followed by California with 6 cases. These 2 areas taken together accounted for 39% of the total cases. Of all states reporting cases in 1971, 8 reported an increase over 1970, 3 recorded a decrease, and 3 reported the same number of cases. Five states that reported cases in 1971 had recorded no cases the previous year. In addition, 17 states have not reported any cases since 1967, and 9 states have not recorded any cases in the past 10 years.

Of the 29 cases on which date of onset was known, more cases occurred in May (7 cases) and November (6 cases) than in other months (Figure 4). Of the 33 cases reported, 31 were adults, 1 was age 5, and 1 was 13. Twenty-one cases (63.6%) occurred in males and 12 cases in females.

Pigeons were the most probable source of infection in 9 cases, parrots in 6, parakeets in 4, canaries in 2, chickens in 1, and turkeys in 1.

Figure 4  
CASES OF HUMAN PSITTACOSIS, BY MONTH OF ONSET  
UNITED STATES — 1971



*(Reported by the Office of Veterinary Public Health Services, Epidemiology Program, CDC.)*

### SUMMARY OF REPORTED CASES OF INFECTIOUS SYPHILIS

CASES OF PRIMARY AND SECONDARY SYPHILIS: BY REPORTING AREAS — DECEMBER 1972 AND DECEMBER 1971 — PROVISIONAL DATA

Reporting Area	December		Cumulative Jan. — Dec.		Reporting Area	December		Cumulative Jan. — Dec.	
	1972	1971	1972	1971		1972	1971	1972	1971
<b>NEW ENGLAND</b>	93	68	898	625	<b>EAST SOUTH CENTRAL</b>	130	104	1,567	1,275
Maine	2	1	28	14	Kentucky	43	28	398	331
New Hampshire	2	—	10	5	Tennessee	36	16	544	367
Vermont	5	—	19	5	Alabama	12	20	216	175
Massachusetts	51	45	520	321	Mississippi	39	40	309	402
Rhode Island	4	5	46	40	<b>WEST SOUTH CENTRAL</b>	206	252	2,941	3,559
Connecticut	29	17	275	240	Arkansas	7	24	174	247
<b>MIDDLE ATLANTIC</b>	508	432	6,034	5,737	Louisiana	49	69	859	750
Upstate New York	42	26	434	456	Oklahoma	3	10	107	105
New York City	315	308	4,107	3,933	Texas	147	149	1,801	2,457
Pa. (Excl. Phila.)	19	21	194	168	<b>MOUNTAIN</b>	47	53	528	590
Philadelphia	45	20	354	231	Montana	—	—	7	1
New Jersey	87	57	945	949	Idaho	—	—	8	12
<b>EAST NORTH CENTRAL</b>	165	222	2,558	2,709	Wyoming	3	—	14	3
Ohio	31	34	316	461	Colorado	17	12	98	73
Indiana	15	18	265	330	New Mexico	6	13	104	159
Downstate Illinois	11	14	138	149	Arizona	17	16	197	211
Chicago	48	80	1,016	859	Utah	1	1	20	17
Michigan	57	74	759	850	Nevada	3	11	80	114
Wisconsin	3	2	64	60	<b>PACIFIC</b>	318	360	3,612	3,398
<b>WEST NORTH CENTRAL</b>	22	22	288	409	Washington	11	10	127	142
Minnesota	10	6	65	70	Oregon	4	1	41	14
Iowa	4	—	52	23	California	301	347	3,404	3,202
Missouri	4	12	108	231	Alaska	1	—	14	22
North Dakota	—	1	2	6	Hawaii	1	2	26	18
South Dakota	—	—	2	9	<b>U.S. TOTAL</b>	2,024	2,017	24,932	24,109
Nebraska	2	2	19	24	<b>TERRITORIES</b>	87	62	891	850
Kansas	2	1	40	46	Puerto Rico	82	61	799	820
<b>SOUTH ATLANTIC</b>	535	504	6,506	5,807	Virgin Islands	5	1	92	30
Delaware	4	2	59	36					
Maryland	46	65	818	650					
District of Columbia	82	52	872	629					
Virginia	64	28	592	353					
West Virginia	1	1	33	32					
North Carolina	33	40	545	443					
South Carolina	44	60	506	404					
Georgia	100	122	1,404	1,585					
Florida	161	134	1,677	1,675					

Note: Cumulative Totals include revised and delayed reports through previous months.

## Morbidity and Mortality Weekly Report

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES  
FOR WEEKS ENDING JANUARY 13, 1973 AND JANUARY 15, 1972 (2nd WEEK)

AREA	ASEPTIC MENIN- GITIS	BRUCEL- LOSIS	CHICKEN- POX	DIPHTHERIA		ENCEPHALITIS			HEPATITIS		
						Primary including unspec. cases		Post In- fectious	Serum (Hepatitis B)	Infectious (Hepatitis A)	
						1973	1972	1973	1973	1973	1972
UNITED STATES	49	-	4,079	-	2	7	20	2	138	868	1,102
NEW ENGLAND	2	-	204	-	-	1	1	-	7	76	74
Maine *	-	-	27	-	-	-	-	-	-	8	9
New Hampshire *	-	-	22	-	-	-	-	-	-	12	4
Vermont	-	-	8	-	-	-	-	-	-	3	5
Massachusetts	2	-	-	-	-	1	1	-	-	36	25
Rhode Island	-	-	61	-	-	-	-	-	1	9	15
Connecticut	-	-	86	-	-	-	-	-	6	8	16
MIDDLE ATLANTIC	8	-	77	-	-	-	-	-	32	166	179
Upstate New York	-	-	3	-	-	-	-	-	1	30	46
New York City	2	-	73	-	-	-	-	-	10	34	31
New Jersey	4	-	NN	-	-	-	-	-	6	38	102
Pennsylvania	2	-	1	-	-	-	-	-	15	64	-
EAST NORTH CENTRAL	4	-	1,589	-	-	3	9	-	14	99	129
Ohio	3	-	125	-	-	-	9	-	8	29	33
Indiana	-	-	289	-	-	-	-	-	1	1	2
Illinois	-	-	-	-	-	-	-	-	-	9	27
Michigan	1	-	341	-	-	3	-	-	5	59	62
Wisconsin	-	-	834	-	-	-	-	-	-	1	5
WEST NORTH CENTRAL	-	-	721	-	2	-	3	-	3	29	58
Minnesota *	-	-	2	-	-	-	-	-	-	-	2
Iowa	-	-	647	-	-	-	-	-	-	7	7
Missouri	-	-	8	-	-	-	-	-	1	13	20
North Dakota	-	-	21	-	-	-	-	-	-	2	1
South Dakota	-	-	-	-	2	-	-	-	-	2	14
Nebraska	-	-	29	-	-	-	-	-	2	-	1
Kansas *	-	-	14	-	-	-	3	-	-	5	13
SOUTH ATLANTIC	6	-	586	-	-	1	1	-	7	123	170
Delaware	-	-	14	-	-	-	-	-	-	2	4
Maryland	-	-	18	-	-	1	-	-	-	16	36
District of Columbia	-	-	2	-	-	-	-	-	-	-	-
Virginia	-	-	90	-	-	-	-	-	1	16	15
West Virginia	-	-	436	-	-	-	-	-	-	7	31
North Carolina	1	-	NN	-	-	-	-	-	2	23	27
South Carolina*	-	-	26	-	-	-	1	-	1	3	14
Georgia *	-	-	-	-	-	-	-	-	-	-	12
Florida	5	-	-	-	-	-	-	-	3	56	31
EAST SOUTH CENTRAL	13	-	216	-	-	-	3	-	22	53	63
Kentucky	2	-	171	-	-	-	-	-	-	14	19
Tennessee	3	-	NN	-	-	-	1	-	-	27	36
Alabama	8	-	37	-	-	-	2	-	22	10	5
Mississippi	-	-	8	-	-	-	-	-	-	2	3
WEST SOUTH CENTRAL	2	-	177	-	-	-	1	-	7	85	112
Arkansas *	-	-	-	-	-	-	-	-	-	1	6
Louisiana *	2	-	NN	-	-	-	-	-	6	28	14
Oklahoma	-	-	3	-	-	-	-	-	1	5	20
Texas	-	-	174	-	-	-	1	-	-	51	72
MOUNTAIN	-	-	236	-	-	-	-	-	2	46	66
Montana	-	-	19	-	-	-	-	-	-	3	2
Idaho	-	-	-	-	-	-	-	-	-	6	10
Wyoming	-	-	91	-	-	-	-	-	-	1	-
Colorado	-	-	60	-	-	-	-	-	-	-	1
New Mexico	-	-	21	-	-	-	-	-	-	17	25
Arizona	-	-	40	-	-	-	-	-	1	16	17
Utah	-	-	4	-	-	-	-	-	1	3	4
Nevada	-	-	1	-	-	-	-	-	-	-	7
PACIFIC	14	-	273	-	-	2	2	2	44	191	251
Washington	5	-	223	-	-	-	-	-	-	15	13
Oregon	-	-	1	-	-	-	-	-	3	33	36
California	9	-	-	-	-	2	2	2	40	138	183
Alaska *	-	-	12	-	-	-	-	-	-	2	5
Hawaii	-	-	37	-	-	-	-	-	1	3	14
Guam	-	-	-	-	-	-	-	-	-	-	-
Puerto Rico	-	-	11	-	-	-	-	-	1	6	-
Virgin Islands	-	-	-	-	-	-	-	-	-	-	-

\*Delayed reports: Aseptic meningitis: (1972) Minn. 3, La. 1

Chickenpox: (1972) Me. 44, N.H. 21, Minn. 138, Kans. 25, Ga. 19, (1973) S.C. 9

Encephalitis, primary: (1972) Minn. 1, La. 1

Hepatitis B: (1972) Kans. 2, Ark. 1, Alaska 6, (1973) S.C. 1

Hepatitis A: (1972) Me. 4, N.H. 1, Minn. 2, Kans. 6, Ga. 2, Ark. 6, La. 6, Alaska 15, (1973) S.C. 6



## Morbidity and Mortality Weekly Report

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TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES  
FOR WEEKS ENDING JANUARY 13, 1973 AND JANUARY 15, 1972 (2nd WEEK) — Continued

AREA	MALARIA		MEASLES (Rubeola)			MENINGOCOCCAL INFECTIONS, TOTAL			MUMPS		RUBELLA	
	1973	Cum. 1973	1973	Cumulative		1973	Cumulative		1973	Cum. 1973	1973	Cum. 1973
				1973	1972		1973	1972				
UNITED STATES .....	3	6	631	1,000	1,199	27	50	66	1,334	2,441	336	470
NEW ENGLAND .....	—	—	250	382	35	2	5	2	85	148	15	25
Maine .....	—	—	—	—	6	—	—	1	2	3	—	—
New Hampshire* .....	—	—	35	57	1	—	1	—	—	1	—	—
Vermont .....	—	—	—	—	—	—	—	—	31	51	—	1
Massachusetts .....	—	—	125	195	—	2	3	—	35	46	10	19
Rhode Island .....	—	—	1	4	23	—	—	1	3	5	—	—
Connecticut .....	—	—	89	126	5	—	1	—	14	42	5	5
MIDDLE ATLANTIC .....	1	2	53	107	132	4	8	3	145	274	16	34
Upstate New York .....	—	1	6	7	1	—	—	2	NN	NN	3	6
New York City .....	—	—	28	64	14	—	2	1	99	197	3	8
New Jersey .....	—	—	11	27	115	2	3	—	20	27	6	16
Pennsylvania .....	1	1	8	9	2	2	3	—	26	50	4	4
EAST NORTH CENTRAL .....	1	1	181	252	491	—	3	12	382	697	70	113
Ohio .....	—	—	5	6	15	—	3	6	22	107	6	11
Indiana .....	—	—	27	27	123	—	—	1	45	71	22	34
Illinois .....	—	—	75	112	180	—	—	3	131	159	9	13
Michigan .....	1	1	44	59	43	—	—	2	45	116	24	32
Wisconsin .....	—	—	30	48	130	—	—	—	139	244	9	23
WEST NORTH CENTRAL .....	—	—	23	28	21	1	1	4	14	45	123	129
Minnesota* .....	—	—	3	3	1	—	—	—	—	—	—	—
Iowa .....	—	—	20	25	16	1	1	—	—	13	9	12
Missouri .....	—	—	—	—	3	—	—	—	—	5	103	103
North Dakota .....	—	—	—	—	1	—	—	—	2	4	4	5
South Dakota .....	—	—	—	—	—	—	—	1	—	—	—	—
Nebraska .....	—	—	—	—	—	—	—	1	2	13	7	9
Kansas .....	—	—	—	—	—	—	—	2	10	10	—	—
SOUTH ATLANTIC .....	1	3	17	24	187	5	8	16	150	292	9	18
Delaware .....	—	—	—	—	—	—	—	1	13	25	—	—
Maryland .....	—	—	—	—	1	3	4	—	24	53	1	1
District of Columbia .....	—	—	—	—	—	—	—	—	2	2	1	1
Virginia .....	1	2	5	5	—	—	1	4	28	35	—	—
West Virginia .....	—	—	1	4	3	—	—	3	32	114	2	8
North Carolina .....	—	1	—	2	5	2	3	4	NN	NN	—	2
South Carolina .....	—	—	1	2	11	—	—	2	2	5	—	—
Georgia* .....	—	—	1	1	19	—	—	—	—	—	—	—
Florida .....	—	—	9	10	148	—	—	2	49	58	5	6
EAST SOUTH CENTRAL .....	—	—	5	15	80	3	6	5	85	143	9	15
Kentucky .....	—	—	1	2	58	—	3	3	5	21	1	1
Tennessee .....	—	—	4	4	12	2	2	—	37	79	6	10
Alabama .....	—	—	—	—	10	1	1	2	35	35	—	2
Mississippi* .....	—	—	—	9	—	—	—	—	8	8	2	2
WEST SOUTH CENTRAL .....	—	—	12	42	47	1	4	5	83	213	17	31
Arkansas .....	—	—	—	—	1	—	—	—	2	3	5	5
Louisiana* .....	—	—	—	—	—	—	—	2	—	—	—	—
Oklahoma .....	—	—	—	1	1	—	—	—	—	6	—	1
Texas .....	—	—	12	41	45	1	4	3	81	204	12	25
MOUNTAIN .....	—	—	22	36	82	5	6	1	115	215	15	22
Montana .....	—	—	—	—	1	—	—	—	3	8	—	—
Idaho .....	—	—	1	2	—	—	—	—	1	3	2	4
Wyoming .....	—	—	—	—	—	—	—	1	37	53	—	—
Colorado .....	—	—	7	15	56	2	2	—	9	11	6	9
New Mexico .....	—	—	12	15	1	—	—	—	38	58	4	5
Arizona .....	—	—	2	4	24	—	1	—	26	81	3	3
Utah .....	—	—	—	—	—	1	1	—	1	1	—	—
Nevada .....	—	—	—	—	—	2	2	—	—	—	—	1
PACIFIC .....	—	—	68	114	124	6	9	18	275	414	62	83
Washington .....	—	—	51	77	26	1	1	—	36	46	12	18
Oregon .....	—	—	7	15	3	2	2	—	53	113	16	18
California .....	—	—	10	20	93	3	6	18	164	220	34	47
Alaska .....	—	—	—	—	—	—	—	—	19	31	—	—
Hawaii .....	—	—	—	2	2	—	—	—	3	4	—	—
Guam .....	—	—	—	—	—	—	—	—	—	—	—	—
Puerto Rico .....	—	—	55	75	—	—	—	—	18	21	1	3
Virgin Islands .....	—	—	—	—	—	—	—	—	—	—	—	—

\*Delayed reports: Measles: (1972) N.H. 33, Minn. 1, Ga. 17, Miss. 47, La. 2, (1973) S.C. 1

Mumps: (1972) Me. 4, N.H. 1, Minn. 10, Kans. 20, Ga. 3, Ark. 3, (1973) S.C. 3

Rubella: (1972) Ga. 15, Ark. 1

## Morbidity and Mortality Weekly Report

TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES  
FOR WEEKS ENDING JANUARY 13, 1973 AND JANUARY 15, 1972 (2nd WEEK) - Continued

AREA	TETANUS	TUBERCULOSIS (New Active)		TULA- REMIA	TYPHOID FEVER		TYPHUS FEVER TICK-BORNE (Rky. Mt. spotted fever)		VENEREAL DISEASES		RABIES IN ANIMALS	
	Cumulative 1973	1973	Cum. 1973	Cumulative 1973	1973	Cum. 1973	1973	Cum. 1973	GONOR- RHEA	SYPHILIS (Pri. & Sec.)	1973	Cum. 1973
									1973	1973		
UNITED STATES .....	—	447	809	4	1	6	1	1	14,374	571	49	79
NEW ENGLAND .....	—	2	15	—	—	—	—	—	194	5	2	3
Maine *	—	—	—	—	—	—	—	—	29	1	2	3
New Hampshire *	—	—	—	—	—	—	—	—	11	1	—	—
Vermont *	—	—	—	—	—	—	—	—	—	1	—	—
Massachusetts .....	—	11	—	—	—	—	—	—	—	—	—	—
Rhode Island *	—	2	3	—	—	—	—	—	29	—	—	—
Connecticut .....	—	—	1	—	—	—	—	—	125	2	—	—
MIDDLE ATLANTIC .....	—	44	130	—	—	3	1	1	1,734	114	2	2
Upstate New York*	—	11	37	—	—	—	—	—	486	8	—	—
New York City .....	—	—	44	—	—	3	—	—	613	62	—	—
New Jersey .....	—	17	33	—	—	—	—	—	272	21	—	—
Pennsylvania .....	—	16	16	—	—	—	1	1	363	23	2	2
EAST NORTH CENTRAL .....	—	73	134	—	—	1	—	—	1,775	19	—	8
Ohio .....	—	11	61	—	—	—	—	—	635	2	—	—
Indiana .....	—	6	8	—	—	—	—	—	177	7	—	1
Illinois .....	—	31	31	—	—	—	—	—	264	3	—	1
Michigan *	—	—	—	—	—	1	—	—	575	7	—	—
Wisconsin .....	—	25	34	—	—	—	—	—	124	—	—	6
WEST NORTH CENTRAL .....	—	9	16	1	—	—	—	—	837	4	22	33
Minnesota *	—	1	1	—	—	—	—	—	261	3	3	4
Iowa .....	—	3	8	—	—	—	—	—	51	—	11	16
Missouri .....	—	4	4	1	—	—	—	—	400	—	2	3
North Dakota *	—	—	—	—	—	—	—	—	10	—	6	7
South Dakota .....	—	—	1	—	—	—	—	—	46	—	—	3
Nebraska .....	—	—	1	—	—	—	—	—	69	1	—	—
Kansas *	—	1	1	—	—	—	—	—	—	—	—	—
SOUTH ATLANTIC .....	—	115	187	—	—	1	—	—	4,573	241	6	9
Delaware *	—	—	2	—	—	—	—	—	36	—	—	—
Maryland .....	—	13	19	—	—	—	—	—	330	57	—	—
District of Columbia .....	—	3	13	—	—	—	—	—	332	11	—	—
Virginia .....	—	23	29	—	—	—	—	—	427	65	4	5
West Virginia .....	—	4	6	—	—	—	—	—	64	1	—	2
North Carolina .....	—	8	24	—	—	—	—	—	460	5	—	—
South Carolina *	—	40	40	—	—	—	—	—	638	10	—	—
Georgia .....	—	13	28	—	—	—	—	—	1,070	55	1	1
Florida .....	—	11	26	—	—	1	—	—	1,216	37	1	1
EAST SOUTH CENTRAL .....	—	34	65	1	—	—	—	—	1,149	55	11	14
Kentucky *	—	11	15	1	—	—	—	—	135	29	4	5
Tennessee .....	—	12	20	—	—	—	—	—	479	9	7	9
Alabama *	—	9	26	—	—	—	—	—	201	3	—	—
Mississippi .....	—	2	4	—	—	—	—	—	334	14	—	—
WEST SOUTH CENTRAL .....	—	64	70	2	—	—	—	—	1,095	47	2	4
Arkansas *	—	7	11	—	—	—	—	—	152	7	1	1
Louisiana *	—	11	11	—	—	—	—	—	319	16	—	—
Oklahoma .....	—	6	8	2	—	—	—	—	131	3	1	3
Texas .....	—	40	40	—	—	—	—	—	493	21	—	—
MOUNTAIN .....	—	23	47	—	—	—	—	—	530	25	1	1
Montana *	—	—	—	—	—	—	—	—	40	—	—	—
Idaho .....	—	—	—	—	—	—	—	—	38	1	—	—
Wyoming .....	—	2	2	—	—	—	—	—	—	—	—	—
Colorado .....	—	—	—	—	—	—	—	—	126	3	—	—
New Mexico .....	—	—	6	—	—	—	—	—	111	7	—	—
Arizona *	—	19	37	—	—	—	—	—	131	13	1	1
Utah .....	—	—	—	—	—	—	—	—	27	—	—	—
Nevada .....	—	2	2	—	—	—	—	—	57	1	—	—
PACIFIC .....	—	83	145	—	1	1	—	—	2,487	61	3	5
Washington .....	—	6	11	—	—	—	—	—	214	—	—	—
Oregon *	—	—	—	—	—	—	—	—	200	—	—	—
California .....	—	71	126	—	1	1	—	—	1,937	52	3	5
Alaska *	—	—	—	—	—	—	—	—	51	8	—	—
Hawaii .....	—	6	8	—	—	—	—	—	85	1	—	—
Guam .....	—	—	—	—	—	—	—	—	—	—	—	—
Puerto Rico .....	—	9	10	—	—	—	—	—	75	10	1	2
Virgin Islands .....	—	—	—	—	—	—	—	—	2	—	—	—

\*Delayed reports: Tularemia: (1972) Ark. 1

Typhoid fever: (1972) Ore. 1

TB: (1972) Me. 5, N.H. delete 1, R.I. 2, Mich. 15, Minn. 4, N. Dak. 2,

Kans. 3, Ky. delete 6, La. 9, Mont. 1, Alaska 3

Gonorrhea: (1972) Me. 19, Minn. 83, La. 22, (1973) S.C. 332

Syphilis: (1972) Vt. 1, N.Y. Ups. 16, Del. 3, La. delete 1, (1973) S.C. 12

Rabies in animals: (1972) Minn. 5, Kans. 3, Ala. 8, La. 1, Ariz. 2

## Morbidity and Mortality Weekly Report

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TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDING JANUARY 13, 1973

Week No.

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(By place of occurrence and week of filing certificate. Excludes fetal deaths)

Area	All Causes			Pneumonia and Influenza All Ages	Area	All Causes			Pneumonia and Influenza All Ages
	All Ages	65 years and over	Under 1 year			All Ages	65 years and over	Under 1 year	
<b>NEW ENGLAND</b>	883	585	31	63	<b>SOUTH ATLANTIC</b>	1,429	768	42	81
Boston, Mass.	284	175	16	31	Atlanta, Ga.	133	72	4	7
Bridgeport, Conn.	68	42	1	7	Baltimore, Md.	168	89	6	3
Cambridge, Mass.	18	13	—	3	Charlotte, N. C.	79	30	6	—
Fall River, Mass.	32	20	1	—	Jacksonville, Fla.	114	62	5	5
Hartford, Conn.	66	43	3	—	Miami, Fla.	133	77	3	5
Lowell, Mass.	29	19	1	—	Norfolk, Va.	91	45	4	13
Lynn, Mass.	31	23	—	2	Richmond, Va.	118	72	3	16
New Bedford, Mass.	30	25	—	3	Savannah, Ga.	58	28	—	5
New Haven, Conn.	61	43	3	1	St. Petersburg, Fla.	116	93	—	5
Providence, R. I.	73	54	2	3	Tampa, Fla.	88	45	4	11
Somerville, Mass.	18	14	—	4	Washington, D. C.	276	126	7	10
Springfield, Mass.	54	34	2	7	Wilmington, Del.	55	29	—	1
Waterbury, Conn.	53	34	2	—	<b>EAST SOUTH CENTRAL</b>	795	436	33	47
Worcester, Mass.	66	46	—	2	Birmingham, Ala.	174	93	6	4
<b>MIDDLE ATLANTIC</b>	3,418	2,092	114	224	Chattanooga, Tenn.	58	31	1	4
Albany, N. Y.	41	28	3	2	Knoxville, Tenn.	37	24	1	—
Allentown, Pa.	35	25	—	4	Louisville, Ky.	181	97	14	15
Buffalo, N. Y.	166	100	8	24	Memphis, Tenn.	101	54	2	6
Camden, N. J.	70	41	5	6	Mobile, Ala.	45	25	—	1
Elizabeth, N. J.	27	19	—	1	Montgomery, Ala.	73	39	3	9
Erie, Pa.	43	30	3	3	Nashville, Tenn.	126	73	6	8
Jersey City, N. J.	75	48	8	7	<b>WEST SOUTH CENTRAL</b>	1,670	902	67	90
Newark, N. J.	84	46	6	13	Austin, Tex.	51	33	1	9
New York City, N. Y.†	1,703	1,032	48	102	Baton Rouge, La.	81	36	3	7
Paterson, N. J.	49	26	—	1	Corpus Christi, Tex.	42	26	4	2
Philadelphia, Pa.	411	248	10	5	Dallas, Tex.	206	106	8	—
Pittsburgh, Pa.	256	140	11	25	El Paso, Tex.	77	38	6	15
Reading, Pa.	54	39	2	4	Fort Worth, Tex.	83	50	3	6
Rochester, N. Y.	131	86	4	11	Houston, Tex.	391	194	11	12
Schenectady, N. Y.	21	14	—	2	Little Rock, Ark.	74	39	4	4
Scranton, Pa.	51	33	2	3	New Orleans, La.	186	104	2	7
Syracuse, N. Y.	92	63	2	1	Oklahoma City, Okla.*	117	68	5	4
Trenton, N. J.	50	29	2	6	San Antonio, Tex.	181	93	13	9
Utica, N. Y.	27	21	—	2	Shreveport, La.	90	52	5	9
Yonkers, N. Y.	32	24	—	2	Tulsa, Okla.	91	63	2	6
<b>EAST NORTH CENTRAL</b>	3,096	1,792	137	110	<b>MOUNTAIN</b>	680	413	34	48
Akron, Ohio	69	39	3	—	Albuquerque, N. Mex.	74	44	1	16
Canton, Ohio	37	23	1	2	Colorado Springs, Colo.	27	19	—	4
Chicago, Ill.	893	501	43	45	Denver, Colo.	185	97	21	11
Cincinnati, Ohio	175	106	5	6	Las Vegas, Nev.	27	13	—	2
Cleveland, Ohio	226	134	14	5	Ogden, Utah	21	12	2	—
Columbus, Ohio	183	88	12	5	Phoenix, Ariz.	131	86	1	1
Dayton, Ohio	153	90	4	4	Pueblo, Colo.	32	25	—	2
Detroit, Mich.	413	208	23	13	Salt Lake City, Utah	74	50	6	3
Evansville, Ind.	47	30	1	4	Tucson, Ariz.	109	67	3	9
Fort Wayne, Ind.	45	30	1	3	<b>PACIFIC</b>	2,319	1,539	59	127
Gary, Ind.	24	14	1	—	Berkeley, Calif.	17	14	—	—
Grand Rapids, Mich.	60	33	3	5	Fresno, Calif.	75	55	1	7
Indianapolis, Ind.	176	104	8	2	Glendale, Calif.	50	40	—	3
Madison, Wis.	52	25	3	4	Honolulu, Hawaii	59	38	4	6
Milwaukee, Wis.	163	110	1	2	Long Beach, Calif.	145	93	4	3
Peoria, Ill.	72	42	4	—	Los Angeles, Calif.	772	511	18	23
Rockford, Ill.	51	30	1	5	Oakland, Calif.	124	75	2	4
South Bend, Ind.	43	27	3	4	Pasadena, Calif.	40	34	1	2
Toledo, Ohio	147	108	3	1	Portland, Ore.	185	115	8	—
Youngstown, Ohio	67	50	3	—	Sacramento, Calif.	86	64	4	5
<b>WEST NORTH CENTRAL</b>	994	658	28	35	San Diego, Calif.	186	111	4	5
Des Moines, Iowa	99	66	4	3	San Francisco, Calif.	264	178	6	28
Duluth, Minn.	32	21	—	4	San Jose, Calif.	57	39	2	13
Kansas City, Kans.	3	—	1	—	Seattle, Wash.	150	90	3	9
Kansas City, Mo.	137	99	1	4	Spokane, Wash.	61	48	2	11
Lincoln, Nebr.	48	35	—	—	Tacoma, Wash.	48	34	—	8
Minneapolis, Minn.	128	86	5	7	<b>Total</b>	15,284	9,185	545	825
Omaha, Nebr.	125	82	2	—	<b>Expected Number</b>	13,572	7,980	560	568
St. Louis, Mo.	250	149	11	6	<b>Cumulative Total (includes reported corrections for previous weeks)</b>	28,663	17,173	1,007	1,464
St. Paul, Minn.	107	79	1	2					
Wichita, Kans.	65	41	3	9					

†Delayed report for week ending Jan. 6, 1973

\*Estimate based on average percent of divisional total

INTERNATIONAL NOTES  
QUARANTINE MEASURES

The following changes should be made in the "Supplement — United States Designated Yellow Fever Vaccination Centers," MMWR, Vol. 21, No. 20:

## COLORADO

## Denver

Department of Health and Hospitals  
Change address, telephone number, and  
clinic hours to:  
645 Bannock Street  
303, 893-6171  
Tues. and Thurs. 10-11 a.m.

## NEW YORK

## White Plains

Westchester County Department of  
Health  
148 Martine Avenue 10601  
914, 949-1300  
Clinic hours: Fri., 2 p.m.  
(NEW CENTER)

## OHIO

## Findlay

Marathon Oil Co. 45840  
Change area code to 419

## PENNSYLVANIA

## Pittsburgh

U.S. Public Health Service Outpatient  
Clinic 15219  
Change clinic hours to: Thursday 1:30-  
2:30 p.m.  
(Effective 2/1/73)

## Erratum, Vol. 22, No. 1, p. 8

In the article "*Clostridium perfringens* Gastroenteritis — Washington," correct the 2nd sentence, 2nd paragraph of the Editorial Note to read: "... 2) demonstration of larger numbers (greater than 10<sup>6</sup> per gm) of organisms in the implicated food and/or in the stools of affected individuals as compared with control subjects . . . ."

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Director, Epidemiology Program, CDC  
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Michael B. Gregg, M.D.

The data in this report are provisional, based on weekly telegraphs to CDC by state health departments. The reporting week concludes at close of business on Friday; compiled data on a national basis are officially released to the public on the succeeding Friday.

In addition to the established procedures for reporting morbidity and mortality, the editor welcomes accounts of interesting outbreaks or case investigations of current interest to health officials.

Address all correspondence to: Center for Disease Control  
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